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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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490 7590 03/16/2005

VIDAS, ARRETT & STEINKRAUS, P.A.
6109 BLUE CIRCLE DRIVE
SUITE 2000

MINNETONKA, MN 55343-9185
06/14/2005 CNGUYEN1 00000082 220350 09920998

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Elizabeth A. Deutsch	(Depositor's name)
<i>Elizabeth A. Deutsch</i>	(Signature)
June 14, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/920,998	08/02/2001	Jonathan Swift Stinson	S63.2-9918	5817

TITLE OF INVENTION: METHOD FOR ENHANCING SHEET OR TUBING METAL STENT RADIOCAPACITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/16/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HO, UYEN T	3731	623-001150

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 VIDAS, ARRETT & STEINKRAUS

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Boston Scientific Scimed, Inc.

Maple Grove, MN

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0350 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature *Lisa Ryan Lindquist*
Typed or printed name Lisa Ryan Lindquist

Date June 14, 2005Registration No. 43,071

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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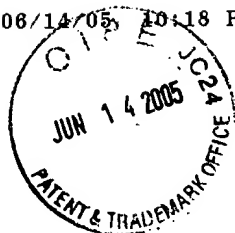
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06/14/2005 CNGUYEN1 00000100 220350 09920998

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Stinson
Application No.: 09/920,998
Filed: October 2, 2001
For: Boston Scientific Scimed, Inc.
Examiner: Uyen T. Ho
Group Art Unit: 3731

FAXED

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Docket No.: S63.2-9918-US01

FACSIMILE TRANSMITTAL LETTER

TO: Examiner

FACSIMILE NO.: 703-746-4000

GROUP ART UNIT: 3731

TOTAL NUMBER OF PAGES (including cover letter): 4

DATE: June 14, 2005

TIME: 9:27am

Following please find a 1 page Part B Fee Transmittal; 1 copy of Part B Fee Transmittal; 1 page Fee Address Indication Form; in addition to this 1 page Facsimile Transmittal Letter.

If a fee is required, Commissioner of Patents is hereby authorized to charge Deposit Account No. 22-0350 for any required fees. To the extent that any petition is required to consider this communication, please treat this as such a petition.

Respectfully Submitted,

VIDAS, ARRETT & STEINKRAUS, P.A.

Date: June 14, 2005

By: 

Lisa Ryan Linquist
Reg. No. 43,071

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Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 703-746-4000, on June 14, 2005.

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Elizabeth A. Deutsch